

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>JD</i>	75331	
O.I.P.E. CLASSIFIER		<i>LE</i>	<i>12-15-89</i>
FORMALITY REVIEW	<i>AD</i>	<i>10/18/89</i>	<i>11-80</i>
RESPONSE FORMALITY REVIEW	<i>11</i>	<i>11</i>	<i>2-10-00</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/12/89
2	✓	✓	10/12/89
3	✓	✓	10/12/89
4	✓	✓	10/12/89
5	✓	✓	10/12/89
6	✓	✓	10/12/89
7	✓	✓	10/12/89
8	✓	✓	10/12/89
9	✓	✓	10/12/89
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28	✓	✓	10/12/89
29	✓	✓	10/12/89
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31	✓	✓	10/12/89
32	✓	✓	10/12/89
33	✓	✓	10/12/89
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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